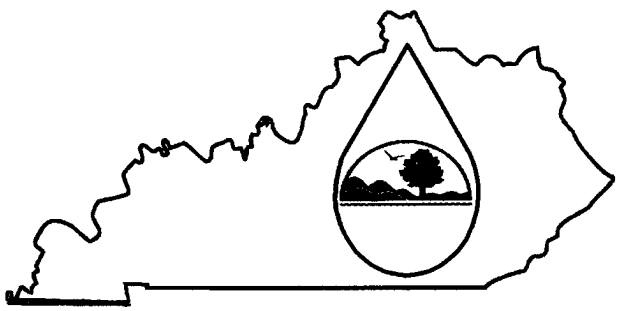
KPDES FORM 1

SCANNED / QC 15512



KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

PERMIT APPLICATION

This is an application to: (check one)

- ☒ Apply for a new permit.
- ☐ Apply for reissuance of expiring permit.
- ☐ Apply for a construction permit.
- ☐ Modify an existing permit.
  Give reason for modification under Item II.A.

A complete application consists of this form and one of the following:
Form A, Form B, Form C, Form F, or Short Form C

For additional information contact:
KPDES Branch (502) 564-3410

$2560.00 ck.

I. FACILITY LOCATION AND CONTACT INFORMATION	AGENCY USE 0 1 1 0 5 3 4 1
A. Name of business, municipality, company, etc. requesting permit Schoate Mining Co., LLC	
B. Facility Name and Location	C. Facility Owner/Mailing Address
Facility Location Name: Briar Hill Mine	Owner Name: Schoate Mining Co., LLC
Facility Location Address (i.e. street, road, etc.): 1850 West Everly Bros. Blvd.	Mailing Street: 1215 Nebo Road
Facility Location City, State, Zip Code: Central City, KY 42330	Mailing City, State, Zip Code: Madisonville, KY 42431
	Telephone Number: (270) 821-0993

II. FACILITY DESCRIPTION

A. Provide a brief description of activities, products, etc: Portable coal preparation process - crushing-screening and washing. Located on a surface coal mining operation

B. Standard Industrial Classification (SIC) Code and Description

Principal SIC Code & Description:	1211 - coal mining and processing		
Other SIC Codes:	N/A		

III. FACILITY LOCATION

A. Attach a U.S. Geological Survey 7 ½ minute quadrangle map for the site. (See instructions)

B. County where facility is located: Muhlenberg	City where facility is located (if applicable): Central City
C. Body of water receiving discharge: Little Cypress Creek	
D. Facility Site Latitude (degrees, minutes, seconds): 37°-15'-25"	Facility Site Longitude (degrees, minutes, seconds): 87°-07'-36"
E. Method used to obtain latitude & longitude (see instructions):	USGS Topographic map
F. Facility Dun and Bradstreet Number (DUNS #) (if applicable):	N/A

IV. OWNER/OPERATOR INFORMATION

A. Type of Ownership:
☐ Publicly Owned ☒ Privately Owned ☐ State Owned ☐ Both Public and Private Owned ☐ Federally owned

B. Operator Contact Information (See instructions)

ame of Treatment Plant Operator: Randy Durham (coal washing plant)	Telephone Number: (270) 757-1677
Operator Mailing Address (Street): 1850 West Everly Bros Blvd.	
Operator Mailing Address (City, State, Zip Code): Central City, KY 42330	
Is the operator also the owner? Yes ☐ No ☒	Is the operator certified? If yes, list certification class and number below. Yes ☐ No ☒
Certification Class: N/A	Certification Number: N/A

V. EXISTING ENVIRONMENTAL PERMITS

Current NPDES Number: N/A	Issue Date of Current Permit: N/A	Expiration Date of Current Permit: N/A
Number of Times Permit Reissued: N/A	Date of Original Permit Issuance: N/a	Sludge Disposal Permit Number: N/A
Kentucky DOW Operational Permit #: KY0105341	Kentucky DSMRE Permit Number(s): 889-0134	

C. Which of the following additional environmental permit/registration categories will also apply to this facility?

CATEGORY	EXISTING PERMIT WITH NO.	PERMIT NEEDED WITH PLANNED APPLICATION DATE
Air Emission Source	Pending	September, 2008
Solid or Special Waste	N/A	N/A
Hazardous Waste - Registration or Permit	N/A	N/A

VI. DISCHARGE MONITORING REPORTS (DMRs)

KPDES permit holders are required to submit DMRs to the Division of Water on a regular schedule (as defined by the KPDES permit). The information in this section serves to specifically identify the department, office or individual you designate as responsible for submitting DMR forms to the Division of Water.

A. Name of department, office or official submitting DMRs:	Richard E Parks

B. Address where DMR forms are to be sent. (Complete only if address is different from mailing address in Section I.)

DMR Mailing Name:	Richard E. Parks
DMR Mailing Street:	1215 Nebo Road
DMR Mailing City, State, Zip Code:	Madisonville, KY 42431
DMR Official Telephone Number:	(270) 821-0993

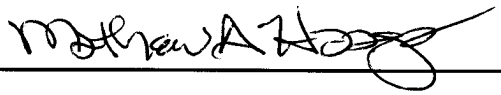
VII. APPLICATION FILING FEE

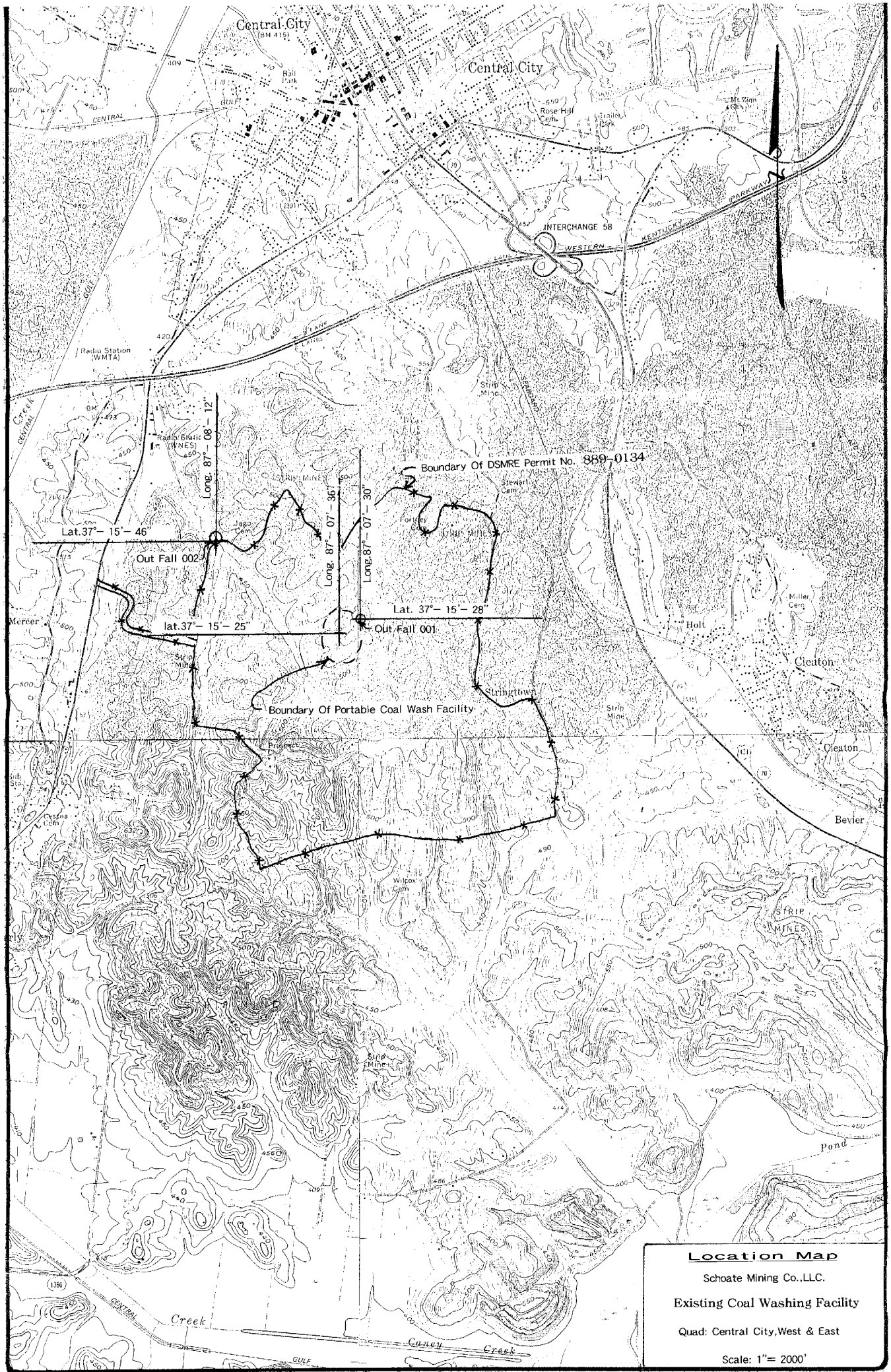
KPDES regulations require that a permit applicant pay an application filing fee equal to twenty percent of the permit base fee. Please examine the base and filing fees listed below and in the Form 1 instructions and enclose a check payable to "Kentucky State Treasurer" for the appropriate amount. Descriptions of the base fee amounts are given in the "General Instructions."

Facility Fee Category:	Filing Fee Enclosed:
Major Industry	$640.00

VIII. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print):	TELEPHONE NUMBER (area code and number):
Mathew A. Haaga, COO	(270) 821-0993
SIGNATURE 	DATE: 8/21/08



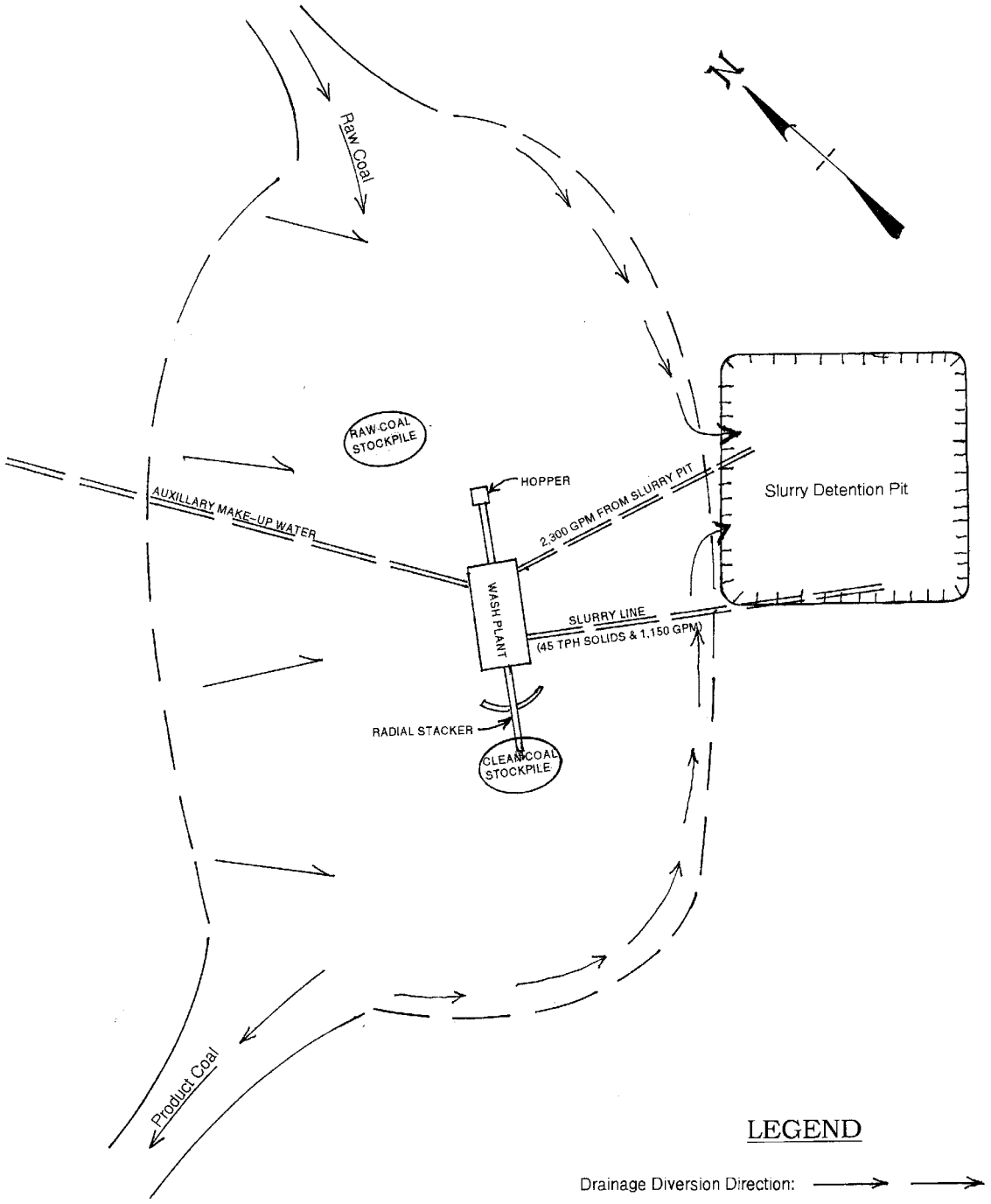
Location Map

Schoate Mining Co.,LLC.

Existing Coal Washing Facility

Quad: Central City,West & East

Scale: 1"= 2000'



LEGEND

Drainage Diversion Direction: ——→ ——→

Sheet Drainage Direction: ——————→

Coal Preparation Site Boundary: —— —— ——

NOT TO SCALE

NOTES: 1.) Containment Berm is Constructed Along Lower Site Boundary At 3FT. Minimum Height.

2.) Make-Up Water for Coal Preparation Plant Will be Pumped From Permitted Sedimentation Ponds.

3.) There Are No Waste Treatment Plants Planned for This Operation.

4.) Waste Water From Slurry Detention Pit is Recycled to Coal Wash Plant.

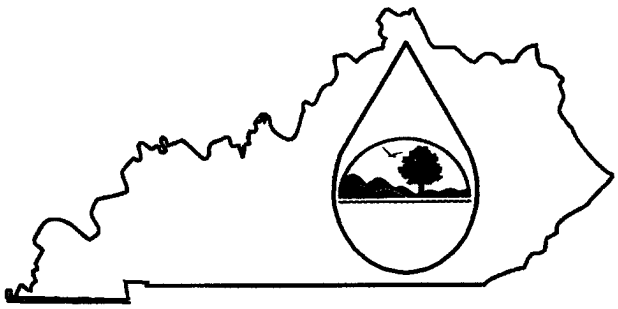
McEWEN
Engineering & Mining Consultant, Inc.
P.O. Box 27 · Beaver Dam, Kentucky 42320 · (270) 274-3356

SCHOATE MINING CO., LLC

COAL WASH FACILITY SITE PLAN

KY-DNR Permit No. 889-0134

KPDES FORM C



KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

PERMIT APPLICATION

A complete application consists of this form and Form 1.
For additional information, contact KPDES Branch, (502) 564-3410.

Name of Facility: Schoate Mining Co., LLC	County: Muhlenberg
I. OUTFALL LOCATION	AGENCY USE

For each outfall list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

Outfall No. (list)	LATITUDE			LONGITUDE			RECEIVING WATER (name)
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds	
001	37°	15'	28"	87°	07'	30"	Closed Circuit
002	37°	15'	46"	87°	08'	13"	Little Cypress Creek

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfall. If a water balance cannot be determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of: (1) all operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) the average flow contributed by each operation; and (3) the treatment received by the wastewater. Continue on additional sheets if necessary.

OUTFALL NO. (list)	OPERATION(S) CONTRIBUTING FLOW		TREATMENT	
	Operation (list)	Avg/Design Flow (include units)	Description	List Codes from Table C-1
001			Setteling of coal slurry.	
	Coal Washing Process	2300 GPM	Decant is recycled in	1-U
			Closed-Circuit Flow process.	
002		Precipitation		
	Strip Mining	run-off	Sediment Basin	1-U

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES (Continued)

C. Except for storm water runoff, leaks, or spills, are any of the discharges described in Items II-A or B intermittent or seasonal?

☐ Yes (Complete the following table.) ☒ No (Go to Section III.)

OUTFALL NUMBER (list)	OPERATIONS CONTRIBUTING FLOW (list)	FREQUENCY		FLOW				
		Days Per Week (specify average)	Months Per Year (specify average)	Flow Rate (in mgd)		Total volume (specify with units)		Duration (in days)
				Long-Term Average	Maximum Daily	Long-Term Average	Maximum Daily	

III. MAXIMUM PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

☐ Yes (Complete Item III-B) List effluent guideline category:

☒ No (Go to Section IV)

B. Are the limitations in the applicable effluent guideline expressed in terms of production (or other measures of operation)?

☐ Yes (Complete Item III-C) ☐ No (Go to Section IV)

C. If you answered "Yes" to Item III-B, list the quantity which represents the actual measurement of your maximum level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

MAXIMUM QUANTITY			Affected Outfalls (list outfall numbers)
Quantity Per Day	Units of Measure	Operation, Product, Material, Etc. (specify)	

IV. IMPROVEMENTS

A. Are you now required by any federal, state or local authority to meet any implementation schedule for the construction, upgrading, or operation of wastewater equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders and grant or loan conditions.

☐ Yes (Complete the following table) ☒ No (Go to Item IV-B)

IDENTIFICATION OF CONDITION AGREEMENT, ETC.	AFFECTED OUTFALLS		BRIEF DESCRIPTION OF PROJECT	FINAL COMPLIANCE DATE	
	No.	Source of Discharge		Required	Projected

B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and indicate your actual or planned schedules for construction.

V. INTAKE AND EFFLUENT CHARACTERISTICS

A, B, & C: See instructions before proceeding – Complete one set of tables for each outfall – Annotate the outfall number in the space provided.
NOTE: Tables V-A, V-B, and V-C are included on separate sheets numbered 5-18.

D. Use the space below to list any of the pollutants (refer to SARA Title III, Section 313) listed in Table C-3 of the instructions, which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in your possession.

POLLUTANT	SOURCE	POLLUTANT	SOURCE
N/A			

VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

A. Is any pollutant listed in Item V-C a substance or a component of a substance which you use or produce, or expect to use or produce over the next 5 years as an immediate or final product or byproduct?

☐ Yes (List all such pollutants below) ☒ No (Go to Item VI-B)

N/A

B. Are your operations such that your raw materials, processes, or products can reasonably be expected to vary so that your discharge of pollutants may during the next 5 years exceed two times the maximum values reported in Item V?

☐ Yes (Complete Item VI-C) ☒ No (Go to Item VII)

C. If you answered "Yes" to Item VI-B, explain below and describe in detail to the best of your ability at this time the sources and expected levels of such pollutants which you anticipate will be discharged from each outfall over the next 5 years. Continue on additional sheets if you need more space.

N/A

VII. BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge of or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☐ Yes (Identify the test(s) and describe their purposes below) ☒ No (Go to Section VIII)

VIII. CONTRACT ANALYSIS INFORMATION

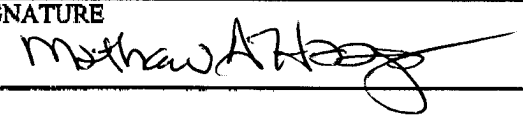
Were any of the analyses reported in Item V performed by a contract laboratory or consulting firm?

☐ Yes (list the name, address, and telephone number of, and pollutants analyzed by each such laboratory or firm below) ☐ No (Go to Section IX)

NAME	ADDRESS	TELEPHONE (Area code & number)	POLLUTANTS ANALYZED (list)
N/A			

IX. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print):	TELEPHONE NUMBER (area code and number):
Mathew A. Haaga, COO	(270) 821-0993
SIGNATURE 	DATE 8/21/08

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets (use the same format) instead of completing these pages. (See instructions)

V. INTAKE AND EFFLUENT CHARACTERISTICS (Continued from page 3 of Form C) | **OUTFALL NO.**

Part A – You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT							3. UNITS (specify if blank)		4. INTAKE (optional)		
	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No o Analy
	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
a. Biochemical Oxygen Demand (BOD)	--	--	--	--	--	--	--	--	--	--	--	
b. Chemical Oxygen Demand (COD)	--	--	--	--	--	--	--	--	--	--	--	
c. Total Organic Carbon (TOC)	--	--	--	--	--	--	--	--	--	--	--	
d. Total Suspended Solids (TSS)	11	--	--	--	--	--	1	mg/L	--	--	--	
e. Ammonia (as N)	--	--	--	--	--	--	--	--	--	--	--	
f. Flow (in units of MGD)	VALUE 2.850		VALUE --		VALUE --		1	MGD		VALUE --		
g. Temperature (winter)	VALUE --		VALUE --		VALUE --		--	°c		VALUE --		
h. Temperature (summer)	VALUE 22.9°		VALUE --		VALUE --		--	°c		VALUE --		
i. pH	MINIMUM 7.5	MAXIMUM 7.5	MINIMUM --	MAXIMUM --			1	STANDARD UNITS				

Part B - In the MARK "X" column, place an "X" in the Believed Present column for each pollutant you know or have reason to believe is present. Place an "X" in the Believed Absent column for each pollutant you believe to be absent. If you mark the Believed Present column for any pollutant, you must provide the results of at least one analysis for that pollutant. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NO. (if available)	2. MARK "X" a. Believed Present	2. MARK "X" b. Believed Absent	3. EFFLUENT a. Maximum Daily Value (1) Concentration	a. Maximum Daily Value (2) Mass	b. Maximum 30-Day Value (if available) (1) Concentration	b. Maximum 30-Day Value (if available) (2) Mass	c. Long-Term Avg. Value (if available) (1) Concentration	c. Long-Term Avg. Value (if available) (2) Mass	d. No. of Analyses	4. UNITS a. Concentration	4. UNITS b. Mass	6. INTAKE (optional) a. Long-Term Avg Value (1) Concentration	a. Long-Term Avg Value (2) Mass	6. INTAKE (optional) b. No. of Analyses
a. Bromide (24959-67-9)		X												
b. Bromine Total Residual		X												
c. Chloride	X		8	--	--	--	--	--	1	mg/L	--	--	--	--
d. Chlorine, Total Residual		X												
e. Color		X												
f. Fecal Coliform		X												
g. Fluoride (16984-48-8)		X												
h. Hardness (as $CaCO_3$)	X		1880	--	--	--	--	--	1	mg/L	--	--	--	--
i. Nitrate – Nitrite (as N)		X												
j. Nitrogen, Total Organic (as N)		X												
k. Oil and Grease		X												
l. Phosphorous (as P), Total 7723-14-0		X												
m. Radioactivity														
(1) Alpha, Total		X												
(2) Beta, Total		X												
(3) Radium Total		X												
(4) Radium, 226, Total		X												

Part B - Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Believed Present	b. Believed Absent	a. Maximum Daily Value (1) Concentration	a. Maximum Daily Value (2) Mass	b. Maximum 30-Day Value (if available) (1) Concentration	b. Maximum 30-Day Value (if available) (2) Mass	c. Long-Term Avg. Value (if available) (1) Concentration	c. Long-Term Avg. Value (if available) (2) Mass	d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value (1) Concentration	a. Long-Term Avg. Value (2) Mass	b. No. of Analyses
n. Sulfate (as SO_4) (14808-79-8)	X		1700	--	--	--	--	--	1	mg/L	--	--	--	--
o. Sulfide (as S)		X												
p. Sulfite (as SO_4) (14286-46-3)		X												
q. Surfactants		X												
r. Aluminum, Total (7429-90)		X												
s. Barium, Total (7440-39-3)		X												
t. Boron, Total (7440-42-8)		X												
u. Cobalt, Total (7440-48-4)		X												
v. Iron, Total (7439-89-6)	X		<0.1	--	--	--	--	--	1	mg/L	--	--	--	--
w. Magnesium Total (7439-96-4)	X		210	--	--	--	--	--	1	mg/L	--	--	--	--
x. Molybdenum Total (7439-98-7)		X												
y. Manganese, Total (7439-96-6)	X		0.605	--	--	--	--	--	1	mg/L	--	--	--	--
z. Tin, Total (7440-31-5)		X												
aa. Titanium, Total (7440-32-6)		X												

Part C – If you are a primary industry and this outfall contains process wastewater, refer to Table C-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in the **Testing Required** colum for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark this column (secondary industries, nonprocess wastewater outfalls, and non-require GC/MS fractions), mark "X" in the **Believed Present** column for each pollutant you know or have reason to believe is present. Mark "X: in the **Believed Absent** column for each pollutant you believe to be absent. If you mar either the **Testing Required** or **Believed Present** columns for any pollutant, you must provide the result of at least one analysis for that pollutant. Note that there are seven pages to this part; please review each carefully. Complet one table (all seven pages) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyse
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
METALS, CYANIDE AND TOTAL PHENOLS															
1M. Antimony Total (7440-36-0)	X			<0.01	--	--	--	--	--	1	mg/L	--	--	--	--
2M. Arsenic, Total (7440-38-2)	X			<0.1	--	--	--	--	--	1	mg/L	--	--	--	--
3M. Beryllium Total (7440-41-7)	X			<.001	--	--	--	--	--	1	mg/L	--	--	--	--
4M. Cadmium Total (7440-43-9)	X			<.002	--	--	--	--	--	1	mg/L	--	--	--	--
5M. Chromium Total (7440-43-9)	X			.005	--	--	--	--	--	1	mg/L	--	--	--	--
6M. Copper Total (7550-50-8)	X			<.005	--	--	--	--	--	1	mg/L	--	--	--	--
7M. Lead Total (7439-92-1)	X			<.006	--	--	--	--	--	1	mg/L	--	--	--	--
8M. Mercury Total (7439-97-6)	X			<.0002	--	--	--	--	--	1	mg/L	--	--	--	--
9M. Nickel, Total (7440-02-0)	X			.011	--	--	--	--	--	1	mg/L	--	--	--	--
10M. Selenium, Total (7782-49-2)	X			<.01	--	--	--	--	--	1	mg/L	--	--	--	--
11M. Silver, Total (7440-28-0)	X			<.005	--	--	--	--	--	1	mg/L	--	--	--	--

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyse
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
METALS, CYANIDE AND TOTAL PHENOLS (Continued)															
12M. Thallium, Total (7440-28-0)	X			<.02	--	--	--	--	--	1	mg/L	--	--	--	--
13M. Zinc, Total (7440-66-6)	X			<.01	--	--	--	--	--	1	mg/L	--	--	--	--
14M. Cyanide, Total (57-12-5)	X			<.01	--	--	--	--	--	1	mg/L	--	--	--	--
15M. Phenols, Total	X			<.05	--	--	--	--	--	1	mg/L	--	--	--	--
DIOXIN															
2,3,7,8 Tetra-chlorodibenzo, P, Dioxin (1784-01-6)			X	DESCRIBE RESULTS:											
GC/MS FRACTION – VOLATILE COMPOUNDS															
1V. Acrolein (107-02-8)			X												
2V. Acrylonitrile (107-13-1)			X												
3V. Benzene (71-43-2)			X												
5V. Bromoform (75-25-2)			X												
6V. Carbon Tetrachloride (56-23-5)			X												
7V. Chloro-benzene (108-90-7)			X												
8V. Chlorodibro-momethane (124-48-1)			X												

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyse
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
9V. Chloroethane (74-00-3)			X												
10V. 2-Chloro-ethylvinyl Ether (110-75-8)			X												
11V. Chloroform (67-66-3)			X												
12V. Dichloro-bromomethane (75-71-8)			X												
14V. 1,1-Dichloroethane (75-34-3)			X												
15V. 1,2-Dichloroethane (107-06-2)			X												
16V. 1,1-Dichlorethylene (75-35-4)			X												
17V. 1,2-Di-chloropropane (78-87-5)			X												
18V. 1,3-Dichloropro-pylene (452-75-6)			X												
19V. Ethyl-benzene (100-41-4)			X												
20V. Methyl Bromide (74-83-9)			X												

Part C – Continued

1. POLLUTANT And CAS NO. (If available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyse
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
21V. Methyl Chloride (74-87-3)			X												
22V. Methylene Chloride (75-00-2)			X												
23V. 1,1,2,2-Tetrachloro-ethane (79-34-5)			X												
24V. Tetrachloro-ethylene (127-18-4)			X												
25V. Toluene (108-88-3)			X												
26V. 1,2-Trans-Dichloro-ethylene (156-60-5)			X												
27V. 1,1,1-Tri-chloroethane (71-55-6)			X												
28V. 1,1,2-Tri-chloroethane (79-00-5)			X												
29V. Trichloro-ethylene (79-01-6)			X												
30V. Vinyl Chloride (75-01-4)			X												

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyse
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2-Chloro-phenol (95-57-8)			X												
2A. 2,4-Dichlor-Orophenol (120-83-2)			X												
3A. 2,4-Dimeth-ylphenol (105-67-9)			X												
4A. 4,6-Dinitro-o-cresol (534-52-1)			X												
5A. 2,4-Dinitro-phenol (51-28-5)			X												
6A. 2-Nitro-phenol (88-75-5)			X												
7A. 4-Nitro-phenol (100-02-7)			X												
8A. P-chloro-m-cresol (59-50-7)			X												
9A. Pentachloro-phenol (87-88-5)			X												
10A. Phenol (108-05-2)			X												
11A. 2,4,6-Tri-chlorophenol (88-06-2)			X												
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acena-phthene (83-32-9)			X												

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyse
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)															
2B. Acenaphtylene (208-96-8)			X												
3B. Anthracene (120-12-7)			X												
4B. Benzidine (92-87-5)			X												
5B. Benzo(a)-anthracene (56-55-3)			X												
6B. Benzo(a)-pyrene (50-32-8)			X												
7B. 3,4-Benzo-fluoranthene (205-99-2)			X												
8B. Benzo(ghl) perylene (191-24-2)			X												
9B. Benzo(k)-fluoranthene (207-08-9)			X												
10B. Bis(2-chlor-oethoxy)-methane (111-91-1)			X												
11B. Bis (2-chlor-oisopropyl)-Ether			X												
12B. Bis (2-ethyl-hexyl)-phthalate (117-81-7)			X												

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyse
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)															
13B. 4-Bromo-phenyl Phenyl ether (101-55-3)			X												
14B. Butyl-benzyl phthalate (85-68-7)			X												
15B. 2-Chloro-naphthalene (7005-72-3)			X												
16B. 4-Chloro-phenyl phenyl ether (7005-72-3)			X												
17B. Chrysene (218-01-9)			X												
18B. Dibenzo-(a,h) Anthracene (53-70-3)			X												
19B. 1,2-Dichloro-benzene (95-50-1)			X												
20B. 1,3-Dichloro-Benzene (541-73-1)			X												
21B. 1,4-Dichloro-benzene (106-46-7)			X												
22B. 3,3-Dichloro-benzidene (91-94-1)			X												
23B. Diethyl Phthalate (84-66-2)			X												

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyse
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)															
24B. Dimethyl Phthalate (131-11-3)			X												
25B. Di-N-butyl Phthalate (84-74-2)			X												
26B. 2,4-Dinitro-toluene (121-14-2)			X												
27B. 2,6-Dinitro-toluene (606-20-2)			X												
28B. Di-n-octyl Phthalate (117-84-0)			X												
29B. 1,2-diphenyl-hydrazine (as azonbenzene) (122-66-7)			X												
30B. Fluoranthene (208-44-0)			X												
31B. Fluorene (86-73-7)			X												
32B. Hexachloro-benzene (118-71-1)			X												
33B. Hexachloro-butadiene (87-68-3)			X												
34B. Hexachloro-cyclopenta-diene (77-47-4)			X												

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyse
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)															
35B. Hexachloroethane (67-72-1)			X												
36B. Indneo-(1,2,3-oc)-Pyrene (193-39-5)			X												
37B. Isophorone (78-59-1)			X												
38B. Napthalene (91-20-3)			X												
39B. Nitrobenzene (98-95-3)			X												
40B. N-Nitrosodimethylamine (62-75-9)			X												
41B. N-nitrosodi-n-propylamine (621-64-7)			X												
42B. N-nitrosodiphenylamine (86-30-6)			X												
43B. Phenanthrene (85-01-8)			X												
44B. Pyrene (129-00-0)			X												
45B. 1,2,4 Trichlorobenzene (120-82-1)			X												

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyse
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – PESTICIDES															
1P. Aldrin (309-00-2)			X												
2P. α-BHC (319-84-6)			X												
3P. β-BHC (58-89-9)			X												
4P. gamma-BHC (58-89-9)			X												
5P. δ-BHC (319-86-8)			X												
6P. Chlordane (57-74-9)			X												
7P. 4,4'-DDT (50-29-3)			X												
8P. 4,4'-DDE (72-55-9)			X												
9P. 4,4'-DDD (72-54-8)			X												
10P. Dieldrin (60-57-1)			X												
11P. α-Endosulfan (115-29-7)			X												
12P. β-Endosulfan (115-29-7)			X												
13P. Endosulfan Sulfate (1031-07-8)			X												
14P. Endrin (72-20-8)			X												

Part C – Continued

1. POLLUTANT And CAS NO. (If available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyse
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – PESTICIDES															
15P. Endrin Aldehyde (7421-93-4)			X												
16P Heptachlor (76-44-8)			X												
17P. Heptaclor Epoxide (1024-57-3)			X												
18P. PCB-1242 (53469-21-9)			X												
19P. PCB-1254 (11097-69-1)			X												
20P. PCB-1221 (11104-28-2)			X												
21P. PCB-1232 (11141-16-5)			X												
22P. PCB-1248 (12672-29-6)			X												
23P. PCB-1260 (11096-82-5)			X												
24P. PCB-1016 (12674-11-2)			X												
25P. Toxaphene (8001-35-2)			X												

Report Number
08-231-0203 **Page:** 2 of 3

Account Number
00102

SMR Laboratories, Inc.

200 North First Street Central City, Kentucky 42330 (270) 754-9928 (270) 754-1288 fax
www.smrlaboratories.com

Send To: Schoate Mining Company
Richard E. Parks
1850 W. Everly Brothers Blvd.
Central City , KY 42330

Project : In Stream Permit Renewal

Purchase Order :
Report Date : 08/26/2008
Date Received : 08/18/2008

REPORT OF ANALYSIS

Date Sampled : 08/18/2008

Lab Number: 76818
Sample Id : Effluent Grab

Analysis	Result	Quantitation Limit	Method	Date and Time Test Started	Analyst
Total Manganese , mg/L	0.605	0.01	EPA-200.7	Aug/21/2008 15:15	JTR
Total Mercury , mg/L	<0.0002	0.0002	EPA-245.1	Aug/25/2008 06:52	TJ
Total Nickel , mg/L	0.011	0.005	EPA-200.7	Aug/21/2008 15:15	JTR
Total Selenium , mg/L	<0.01	0.01	EPA-200.7	Aug/21/2008 15:15	JTR
Total Silver , mg/L	<0.005	0.005	EPA-200.7	Aug/21/2008 15:15	JTR
Total Sulfate (SO4) , mg/L	1700	100	EPA-300.0	Aug/20/2008 08:31	KS
Total Suspended Solids , mg/L	11	2	SM-2540D	Aug/20/2008 06:15	AH
Total Thallium , mg/L	<0.02	0.02	EPA-200.7	Aug/21/2008 15:15	JTR
Total Zinc , mg/L	<0.01	0.01	EPA-200.7	Aug/21/2008 15:15	JTR
Total Calcium , mg/L	407	0.1	EPA-200.7	Aug/21/2008 15:15	JTR
Total Magnesium , mg/L	210	0.1	EPA-200.7	Aug/21/2008 15:15	JTR

M. Scott McKee

Report Number
08-231-0203 **Page:** 1 of 3

Account Number
00102

SMR Laboratories, Inc.

200 North First Street Central City, Kentucky 42330 (270) 754-9928 (270) 754-1288 fax
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Send To: Schoate Mining Company
Richard E. Parks
1850 W. Everly Brothers Blvd.
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Project : In Stream Permit Renewal

Purchase Order :
Report Date : 08/26/2008
Date Received : 08/18/2008

REPORT OF ANALYSIS

Date Sampled : 08/18/2008

Lab Number: 76818
Sample Id : Effluent Grab

Analysis	Result	Quantitation Limit	Method	Date and Time Test Started	Analyst
Digestion ,	Digested		EPA-200.7 (PREP)	Aug/25/2008 15:34	
Chloride , mg/L	8.00	2.5	SM-4500-CL-B	Aug/19/2008 08:52	AH
Hardness as CaCO3(SM-2340B) , mg/L	1880	0.412	EPA-200.7	Aug/21/2008 15:15	JTR
pH , s.u.	7.5		SM-4500H+B	Aug/18/2008 20:20	AH
Phenols (Total) , mg/L	<0.05	0.05	EPA-420.1	Aug/20/2008 12:12	DRG
Total Antimony , mg/L	<0.01	0.01	EPA-200.7	Aug/21/2008 15:15	JTR
Total Arsenic , mg/L	<0.1	0.1	EPA-200.7	Aug/21/2008 15:15	JTR
Total Beryllium , mg/L	<0.001	0.001	EPA-200.7	Aug/21/2008 15:15	JTR
Total Cadmium , mg/L	<0.002	0.002	EPA-200.7	Aug/21/2008 15:15	JTR
Total Chromium , mg/L	0.005	0.005	EPA-200.7	Aug/21/2008 15:15	JTR
Total Copper , mg/L	<0.005	0.005	EPA-200.7	Aug/21/2008 15:15	JTR
Total Cyanide , mg/L	<0.01	0.01	SM-4500CNE	Aug/22/2008 09:20	GD
Total Iron , mg/L	<0.1	0.1	EPA-200.7	Aug/21/2008 15:15	JTR
Total Lead , mg/L	<0.006	0.006	EPA-200.7	Aug/21/2008 15:15	JTR

M. Scott McKee

McEWEN ENGINEERING
AND MINING CONSULTANT, INC.
P.O. BOX 27
BEAVER DAM, KENTUCKY 42320
(270) 274-3356

August 27, 2008

Division of Water
Department for Enviornmental Protection
14 Reilly Road
Frankfort, KY 40601

RE: Schoate Mining Co., LLC.
KPDES No. KY0105341

Dear Ladies/Gentlemen:

Enclosed are the Form 1, KNDOP, and Form C completed for application of renewal of the aboved referenced permit. The facility to be permitted is a coal washing facility that is located on KY-DNR Permit No. 889-0134 that authorizes surface coal mining. This permit was covered under the general permit for structure mining prior to the coal washing operation that started in late 2004.

The in-stream grab sample was taken and analyzed for the required parameters. The applicant request a variance from submitting analysis from all other parameters listed in Form C since they were believed to be absent.

If you have any questions in the processing of this renewal application, please contact me at (270) 274-3356.

Sincerely,

Stephen P. McEwen, P.E.
bb

McEWEN ENGINEERING
AND MINING CONSULTANT, INC.
P.O. BOX 27
BEAVER DAM, KENTUCKY 42320
(270) 274-3356

September, 11, 2008

Ms. Morgan Elliston
Surface Water Branch
Division of Water
14 Reilly Road
Frankfort, KY 40601

RE: Schoate Mining Co., LLC.
KPDES No:KYO105341 (Renewal)
AI-ID:15512
Muhlenberg County, Kentucky

Dear Ms. Elliston:

We are responding to the items listed in your letter dated, September 5, 2008, as follows:

1.) Page No. 3 is provided with this submittal for Form C

2.) The data entry for the analysis from the recent grab sample has been corrected for Form C as you have requested. Corrected Page No. 7 is included with this submittal.

If you need any further assistance concerning this application please contact me at (270) 274-3356.

Sincerely,

Stephen P. McEwen, P.E.
lv